ATE: 9/17/01	FROM: K 7	(print name)
AIE:	REASON(S):	<del></del>
ODWARD TO:	A. You had Parent	(check box)
ORWARD TO: Art Unit: 267)		(check box)
	C. See Abstract	(check box)
	D. See Claim(s):	·
	D. Ood Grammey.	and a street of the street
JRTHER EXPLANATION	IF NEEDED: Jisplay po	wer consulting
0.6.	for 345/211 Km	wer consurtie
ATE: SP	FROM:	(print name)
	REASON(S):	
ORWARD TO:	A. You had Parent	(check box)
A. Art Unit:	B. See Title	(check box)
3. Class:	C. See Abstract	(check box)
C Subclass:	D. See Claim(s):	
		<del></del>
FURTHER EXPLANATION	1 IF NEEDED:	
\	FROM:	(print name)
\	FROM:	(print name)
DATE:	FROM: REASON(S):	(print name)
DATE:	FROM: REASON(S):	
DATE:	FROM:  REASON(S):  A. You had Parent	(check box)
DATE:	FROM:  REASON(S):  A. You had Parent  B. See Title  C. See Abstract	(check box)
DATE: FORWARD TO CLASSIFI	FROM:  REASON(S):  A. You had Parent  B. See Title  C. See Abstract  D. See Claim(s):	(check box)
DATE: FORWARD TO CLASSIFI	FROM:  REASON(S):  A. You had Parent  B. See Title  C. See Abstract  D. See Claim(s):	(check box)
DATE: FORWARD TO CLASSIFI	FROM:  REASON(S):  A. You had Parent  B. See Title  C. See Abstract  D. See Claim(s):	(check box)
DATE:  FORWARD TO CLASSIFI  FURTHER EXPLANATION	FROM:  REASON(S):  A. You had Parent  B. See Title  C. See Abstract  D. See Claim(s):  N IF NEEDED:	(check box)
DATE:  FORWARD TO CLASSIFI  FURTHER EXPLANATION  DISPOSITION BY 270	FROM:  REASON(S):  A. You had Parent  B. See Title  C. See Abstract  D. See Claim(s):	(check box)
DATE:  FORWARD TO CLASSIFI  FURTHER EXPLANATION	FROM:  REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s):  N IF NEEDED:  OO CLASSIFICATION  CLASSIFIER:	(check box)
DATE:  FORWARD TO CLASSIFI  FURTHER EXPLANATION  DISPOSITION BY 270  DATE:	FROM:  REASON(S):  A. You had Parent  B. See Title  C. See Abstract  D. See Claim(s):  N IF NEEDED:  OO CLASSIFICATION  CLASSIFIER:  REASON(S):	(check box)
DATE:  FORWARD TO CLASSIFI  FURTHER EXPLANATION  DISPOSITION BY 270  DATE:  FORWARD TO:	FROM:  REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s):  N IF NEEDED:  OO CLASSIFICATION  CLASSIFIER:	(check box) (check box)
DATE:  FORWARD TO CLASSIFI  FURTHER EXPLANATION  DISPOSITION BY 270  DATE:  FORWARD TO:  A. Art Unit:	FROM:  REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s):  N IF NEEDED:  CLASSIFICATION  CLASSIFIER:  REASON(S): A. You had Parent B. See Title	(check box) (check box) (check box)
DATE:  FORWARD TO CLASSIFI  FURTHER EXPLANATION  DISPOSITION BY 270  DATE:  FORWARD TO:	FROM:  REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s):  N IF NEEDED:  OO CLASSIFICATION  CLASSIFIER:  REASON(S): A. You had Parent	(check box) (check box) (check box) (check box) (check box)

FURTHER EXPLANATION IF NEEDED: